

## PUBLIC RECORDS REQUEST FORM

		MuckBoo	k News DEPT MR32374	1		
Name:	A	ddress: 411A High	nland Ave			
Beryl Lipton	(	City: Somerville	State: M	A Zip:	02144	
Phone No.: 617-299-1832	Cell No.:		E-Mail:32	E-Mail:32374-81140152@requests.muckrock.com		
The employee having custody of public record public record. The employee having cu otification of the need for additional time dministrator, if written appeal is filed with within five working days, which will be hea ong as that appeal is filed no later than thin	ustody of the public reco . If the request is denied in five working days. If yord at the next regular so	ords shall respond withing I in whole or in part, you ou are not satisfied with Theduled assembly meeting	n ten working days of the r u will be notified in writing. the ruling of the municipal a	equest. This time f You may appeal to dministrator, you n	frame may be extended by the denial to the municipal may appeal to the assembly	
Title of Record(s): Protested	for-profit prison town	IS				
Date of Record(s):						
Description of Record(s): 1	Please provide a	ny additional in	formation that will	assist us in	locating the	
record(s) for you as quickly	as possible:					
ny and all materials regarding or refe	rencing the potential of	of a privately-operated	prison within the jurisdic	ction of this agen	cy. Please include	
Other communications (emails, letters Requests for Proposals and all assoc  • Requestor's Signature:			-		nutes, council notes	
•	A //				August 9, 2019	
*** Please Note: This form	_	ed and returned to FOR OFFICE USE (	_	k's Office for	processing. ***	
• Photocopies	\$ .25 p	per page + tax			\$	
<ul> <li>Assembly Packets</li> </ul>		each packet + tax			\$	
Audio Copy		each + tax			\$	
• Video Copy		each + tax			\$	
• Mylar Copies of Plats		per mylar copy + ta			\$	
• Certified Copies		1st page .25 each ac	lditional page		\$	
• Copy of Budget		each + tax			\$	
• Other		be determined			\$	
• The salary of an employee(s) (hourly rate plus benefits) fill	\$	labor x no	ours + tax	anta	\$	
requested generate labor in ex The municipality may reduce or waive a shall be uniformly applied among persons to the municipality to arrange for paymen	xcess of one hour. fee when the municipali who are similarly situate	ity determines that the re	eduction or waiver is in the wwaive a fee of five dollars o	public interest. Fe r less if the fee is le		
			TOTAL	L CHARGES	\$	
Date Request Received:	Completed By or R	eferred to (check a box	s below) Name:			
☐ Request for Record(s) Copy(ies) to	tal \$	was received on	and prov	ided or mailed/en	nailed on	
☐ Record(s) or Information is exempt	from disclosure and p	ublic access is denied	and the requestor was noti	fied on		
☐ Record(s) or Information cannot be	e located or do not exis	t and the requestor was	s notified on			
☐ Record(s) or Information available	online at www.cityofs	itka.com				
The departments that have a check ma  ☐ Administration ☐ Assessing ☐ Centennial Building ☐ Electric Department	rk have been copied to Finance Fire Department Harbor Departmen Human Resources	nt $\square$	cords request. IS – Email Library Legal Department Municipal Clerk	□ Pol □ Pub	nning Department ice Department slic Works er:	